



Attitudes Towards Filial Responsibility in 11 European Countries: Changes Between 2001 and 2017

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Abstract

This study examines how attitudes towards filial responsibility (AFR) have changed in 11 European countries between 2001 and 2017, based on data from the International Social Survey Programme. These countries include various types of welfare states and family traditions. The study also analyses the change in AFR according to the respondents' gender and age. The findings indicate that in 2017, individuals reported lower filial responsibility than in 2001, with the exception of Great Britain, where the AFR increased. The most substantial decreases in AFR were observed in Hungary, France, Denmark, and Finland. This negative shift is visible in both genders and all age groups, particularly late middle-aged women. However, despite the varying intensity of AFR change, it was challenging to identify clear patterns in the variations between countries. These results highlight potential negative effects on political proposals for long-term care for older adults supported by younger generations.

Keywords: filial responsibility; attitudes; European demographics; older adult care; informal care; welfare state

Introduction

Two significant trends are evident in European demographics: a declining birth rate and an increase in life expectancy (Organisation for Economic Co-operation and Development [OECD] 2017). These trends highlight a severe deterioration in the dependency ratio, because a diminishing percentage of individuals of working age are compelled to shoulder an escalating responsibility for the welfare of older adults. Consequently, a critical question arises: Who should be responsible for the care of our oldest and most vulnerable citizens? There are three primary options: the market, the state, and the family. Following World War II, most European nations selected their own welfare models, which include different levels of prioritisation of these care sources. For instance, some countries lean more towards market or family-oriented models, while others favour state-oriented models (Esping-Andersen 1990, 2009). It appears that in the European discourse on ageing, policymakers are increasingly placing their hopes on middle-aged children to take on a larger role in caring for their parents (Broese van Groenou and De Boer 2016; Ranci and Pavolini 2015).

The intergenerational solidarity model is often used to highlight the importance of relationships between adult children and their parents by explaining six dimensions of familial bonds (Bengtson, 2001; Bengtson and Roberts, 1991). These dimensions include associational solidarity (e.g., frequency of contact), functional solidarity (e.g., provision of assistance), affectual solidarity (e.g., feelings between family members), consensual solidarity (e.g., agreement on values), structural solidarity (e.g., geographical distance), and normative solidarity (e.g., parental and filial obligations). In this study, we primarily analyse normative solidarity. This dimension includes two crucial norms: parents have a duty to care for their children, and adult children have a responsibility to care for their older parents and grandparents. The latter norm is often referred to as filial obligation or filial responsibility (Dykstra and Fokkema 2012; Lowenstein and Daatland 2006; Stuifbergen and Van Delden 2011). In an Asian context, this is known as filial piety (Bedford and Yeh 2021).

Here, we study attitudes towards filial responsibility (AFR). Attitude can be defined as ‘a psychological tendency that is expressed by evaluating a particular entity with some degree of favor or disfavor’ (Eagly and Chaiken 1993, 1). This definition includes three crucial aspects of attitudes: evaluation, attitude object, and tendency (Eagly and Chaiken 2007). Attitudes are typically studied through representative surveys in which participants assess a statement about an attitude object using a standard scale. In this research, the attitude object was the general norm of filial responsibility, measured by the response to the statement asking whether it is the duty of adult children to care for their older parents. It is crucial to highlight that, in this context, the norm refers to adult children in general, and not to a specific offspring of an individual.

The unique aspect of this study lies in the dearth of repeated cross-sectional and cross-country research on long-term shifts in people’s attitudes towards whether adult children should bear the responsibility for the care of older adults. We analyse here whether AFR have altered in 11 European countries from 2001 to 2017, and whether this potential shift varies by gender and age. The countries are Austria, Czech Republic,

Denmark, Finland, France, Germany, Hungary, Slovenia, Spain, Switzerland, and Great Britain. Europe has experienced significant demographic and social changes during the first two decades of the 21st century, such as population ageing, increased participation of women in the labour market, and a substantial expansion of the European Union. Notably, the data used in this study allow us to compare changes in AFR across European societies. The countries surveyed represent different family cultural traditions and types of welfare state. Therefore, we can analyse whether the shift in attitudes towards caring for one's own parents has evolved differently in various European societies.

Family cultures and welfare state types

For several decades, the European Values Study has consistently aimed to identify what respondents regard as the most crucial aspect of their lives. The response has been consistently and universally the same, namely, family (Evalue 2023). The family is a strong social institution with an evolutionary biological foundation, and family members are united not only by a strong emotional connection, but also by a sense of responsibility for mutual assistance and care (Tanskanen and Danielsbacka 2019).

While the family may be considered the most significant social institution globally, its interpretation varies across countries, with historically distinct family cultures (Laslett 1983). The traditional 'Hajnal line' concept (Hajnal, 1965; 1982) divided Europe broadly into Eastern and Western regions. The Eastern region included multigenerational households, early and nearly universal marriages, leading to a smaller percentage of individuals who never married. Conversely, the Western region was marked by nuclear families, later marriages, and a substantial percentage of women and men who remained unmarried. However, there is often more regional variation than initially expected based solely on the Hajnal line concept. For instance, Reher (1998) perceives Mediterranean countries as societies with a strong family status, and Northern and Central European countries as societies where family status is weak, but individual status is strong. In countries with strong family ties, young adults tend to stay in their parents' household for an extended period until they marry and establish their own families. In these countries, most social assistance and support are exchanged within the family, with the responsibility of caring for older generations falling on the younger generations, typically daughters or daughters-in-law. In countries with weak family ties, young individuals gain independence at an early age and begin living independently from their parents before entering a relationship and starting their own family. Here, social support, childcare, and older adult care primarily come from public revenue transfers and public or private services.

Reher's (1998) somewhat simplified model has faced criticism, for example from Castiglioni et al. (2016). When analysing the exchange of social support across generations, it is evident that in Scandinavian countries, the frequency of social and financial support between generations surpasses that in Mediterranean countries, even though the intensity of such support is lower. Central European countries, on the other hand, occupy a middle position in this regard (Albertini, Kohli, and Vogel, 2007; Brandt, Haberk-

ern, and Szydlik 2009; Calzada and Brooks 2013; Daatland, Herlofson, and Lima 2011; Lowenstein and Daatland 2006; Mureşan and Hărăguş 2015). Therefore, there are differences in family relationships between the southern and northern regions of Europe, but the question is about the qualitative differences, not the significance of family in the south and north. While the solidarity between generations is similar in both Eastern and Southern Europe, there are country-specific differences within Eastern Europe (Dykstra 2010).

Family culture characteristics are also mirrored in family law statutes across countries. When we analyse the legal responsibility of adult children to financially support their ageing parents, we see a regional variation that generally aligns with the south–north divide in Europe. In Scandinavian countries, there are no such legal obligations, whereas in almost all other European countries, these obligations are codified in law, although the extent of these obligations does vary (Saraceno and Keck 2010). The prevailing view throughout Europe is that the financial wellbeing of older individuals should be ensured through pensions, with family law provisions for care coming into play only when a pension is inadequate for a decent standard of living. In Northern European countries, where children are not legally required to financially support their ageing parents, a shift in attitude from traditional family responsibilities towards individual rights is likely more prevalent than in countries where the law mandates care provision (Fokkema et al. 2008; Van den Broek, Dykstra, and Van der Veen 2015). Prior research also highlights that regional family culture differences in Europe are reflected in variations in attitudes towards AFR. In general, the AFR level is highest in Mediterranean and Eastern European countries, and lowest in Nordic countries (Daatland and Herlofson 2003; Dykstra 2010; Herlofson et al. 2011; Lowenstein and Daatland 2006; Marckmann 2017). However, it is essential to highlight that in countries where the state provides more welfare benefits, initial agreement about filial responsibility is likely to be lower in the first instance. This suggests that any change might not be very significant.

The disparities in family cultures across Europe, spanning the south, north, east, and west, may be becoming less pronounced as all societies shift from collectivism to individualism (Santos, Varnum, and Grossmann 2017). In cultures that highlight collectivism, the family, neighbouring communities, or the nation dictate people's status and behaviour. Conversely, in individualistic cultures, individuals are autonomous and largely independent of community norms, and they focus on the individual's personal goals and aspirations (Hui and Triandis 1986; Triandis 2001). The rise of individualism is thought to be linked to the economic and social progress of societies. Factors such as the improvement in education levels, the inclusion of women in the workforce, the shift to white-collar jobs, urbanisation, and the general term 'modernisation', all promote individualism. Many of these characteristics are also seen as components of the 'second demographic transition', a theory that suggests developments since the 1970s manifest as changes in family-related behaviour and social norms (Lesthaeghe and Van de Kaa 1986; Lesthaeghe 2014). Key elements of the second demographic transition include declining fertility rates, increasing gender equality, greater education and labour market participation among women, and enhanced financial independence for women. Societies in Northern and Western Europe and North America have progressed the most in the process of individualism, although it appears to be spreading globally (Inglehart and Baker 2000; Santos et al. 2017).

The literature also includes analyses of the specific process of institutional individualism (Frericks and Höppner 2018; Ranci and Pavolini 2015). Here, the welfare state plays a crucial role by ensuring the fulfilment of individual social rights, which may include aspects such as the provision of an adequate basic livelihood and care for older adults. European countries vary in their implementation of welfare policies through different models or regimes (Anttonen and Sipilä 1996; Arts and Gelissen 2002; Esping-Anderson 1990). Individuals in countries with high levels of public services and transfers, such as Nordic countries, are not inclined to adhere to stringent standards of informal care. However, in Mediterranean and many Eastern European countries, because obtaining public support for managing caregiving responsibility is often challenging, the normative pressure to provide informal care intensifies (Calzada and Brooks 2013; Marckmann 2017). For instance, the responsibilities of public services and families differ in terms of caring for children and older adults. Nevertheless, European societies, with the assistance of the European Union, have strived to harmonise their social policies so that fundamental social rights are achieved on a somewhat equal basis across the member states. For instance, quality and long-term care for older adults is highlighted in EU documents as a fundamental right that should be guaranteed in all member states (European Commission 2021).

Gender and age

The employment rate among European women has increased notably in recent decades, primarily because of various social factors associated with efforts to advance gender equality (Plantenga et al. 2009). Another contributing factor is economic: by enhancing the employment rate, Europe can boost its productivity and competitiveness relative to its rivals, such as the United States and China, among others. From the perspective of this study, the question concerning the rise in women's employment rate is of particular interest. On the one hand, women are encouraged to pursue education, establish a profession, and engage more actively in the labour market. However, they are also expected to take on the responsibility of intergenerational care.

The goals of enhancing the employment rate among women have evidently been successful. From the perspective of our study, it is particularly intriguing to analyse the progression of the employment rate among women nearing retirement age. This is because these women are predominantly anticipated to assume an increasing responsibility for the care of their own parents. As per the labour force statistics provided by the OECD (Table 1), the labour force participation rate of women aged between 55 and 64 in the European Union increased from 27.6% in 2000 to 56.3% in 2020, a difference of nearly 30 percentage points, on average. Among the countries included in this study, the most significant increase in the labour market participation of women aged between 55 and 64 was observed in the Czech Republic, Hungary, Germany, and Slovenia, all of which initially had a low level. Conversely, the slowest growth was noted in Switzerland, Great Britain, and Denmark, where the initial level was already relatively high.

Table 1. *Labour force participation rate of women 55–64 years old in 2000 and 2020 in some European countries.*

	Labour force participation rate, women 55–64 years old, year 2000	Labour force participation rate, women 55–64 years old, year 2020	Change
Czech Republic	23,7	62,8	+39,1
Hungary	13,3	50,6	+37,3
Germany	33,5	70,1	+36,6
Slovenia	14,1	48,5	+34,4
Spain	22,6	55,7	+33,0
Austria	17,6	48,8	+31,1
European Union 27	27,6	56,3	+28,6
Finland	45,2	73,5	+28,3
France	27,9	54,9	+27,0
Denmark	48,9	70,1	+21,2
United Kingdom	43,1	63,0	+19,9
Switzerland	51,3	70,0	+18,7
OECD Countries	38,3	55,2	+17,0

Source: OECD

As women approach their retirement age, they are not only expected to remain in the workforce for as long as possible, but also to carry out traditional household duties, such as providing intergenerational care. It is widely accepted among researchers that the primary responsibility for the informal care of older adults continues to be shouldered by women, be they wives, daughters, or daughters-in-law (Dykstra and Djundeva 2020, 332; Hämäläinen and Tanskanen 2021). This issue is becoming increasingly pressing, particularly given the fact that as family sizes shrink, the pool of potential caregivers in younger generations diminishes, while the number of older adults requiring care is increasing. Consequently, it can be inferred that the willingness of women nearing retirement age to care for their own parents is likely to decline. This shift in attitude is likely to be mirrored by other family members of varying ages and life stages.

What does existing research reveal about the relationship between gender and AFR? One might logically infer that if women provide more assistance and support to their older parents than men do, they would also demonstrate a greater commitment to the norm of care. However, this is not always the case. Numerous studies conducted across different countries have highlighted that women are less committed to the norm of filial obligation than men, and women tend to have a more negative attitude towards the concept of filial obligation. This is particularly true in Northern and Western Europe,

where welfare services are readily available, and women's participation in the workforce is more prevalent than in other European regions (Daatland and Herlofson 2003; Dykstra and Fokkema 2012; Herlofson et al. 2011). It is reasonable to assume that the trend in the rest of Europe is following a similar trajectory to what has already been observed in Northern and Western Europe, with women becoming more critical of the obligation to assist their parents. However, this likely pertains to the provision of help that imposes a significant burden on the helper.

What is the relationship between a respondent's age and AFR variation? There are differing theoretical perspectives on this matter (Dykstra and Fokkema 2012). One might assume that the obligation to care for one's parents peaks when parents become reliant on their children's assistance. In such a scenario, middle-aged children would feel the strongest compulsion to aid their parents. This assumption is supported by a study carried out by Gans and Silverstein (2006) in the United States. However, studies from Europe indicate that the correlation between the age of adult children and AFR can differ from one country to another. It appears that in more developed welfare states, AFR support may decrease with age, while in less developed welfare states, it could increase with age (e.g., Daatland et al. 2012; Dykstra 2010).

Previous research on AFR changes over time

Research that analyses changes in AFR over time, including longitudinally is surprisingly limited. Gans and Silverstein (2006) used population-based samples gathered in Southern California from 1985 to 2000, finding that AFR had decreased over time. Hsu, Lew-Ting, and Wu (2001) found similar results using population-based samples from Taiwan, collected between 1984 and 1995. Using Norwegian data collected from 2002 to 2008, Herlofson et al. (2011) also found a decrease in filial responsibility over the study period. However, a recent study by Wang, Wan, and Gu (2021) conducted in three south-east regions of China did not find a significant decline in attitudes towards AFR between 2004 and 2017. Lastly, a study by Van den Broek et al. (2015) used Dutch data from 2002 and 2011, and highlighted a shift from the concept of 'warm-modern care' (where both the family and state share caregiving responsibilities with egalitarian gender roles) to 'cold-modern care' (characterised by increased state responsibility, reduced family responsibility, and egalitarian gender roles).

All the studies mentioned above used data that enabled to study changes over time for different generations, periods and age groups. However, these studies also have their limitations. For instance, the studies conducted by Gans and Silverstein (2006) and Hsu et al. (2001) relied on data collected many years ago, and therefore, they are unable to capture the most recent changes in AFR. Furthermore, a significant limitation of all these studies is that they are based on data from a specific region, rather than including cross-country data. This makes it impossible to compare regional differences in family culture and in types of welfare states.

Hypotheses

Based on existing theories and prior literature in the field, we propose two hypotheses (H) about the AFR change in Europe in the first two decades of the 21st century. Owing to the process of individualism, which challenges traditional family values, and the considerable increase in the participation of women in the labour force in Europe during this period, we hypothesise as follows:

H1. The AFR in 2017 will be lower than it is in 2001.

H2. The AFR will decrease, especially among middle-aged women and women approaching retirement age, because the care obligation has traditionally been more applicable to these groups relative to others.

Data and methods

The data for this study were obtained from the cross-sectional International Social Survey Programme (ISSP) Social Networks module surveys, specifically, ‘Social Relations and Support Systems’, conducted in 2001, and ‘Social Networks and Social Resources’, conducted in 2017. Both surveys included representative samples of the population aged 18 and above, with the exception of Denmark and Finland, where the age ranges were 15 and above and 15–74, respectively. For a more comprehensive explanation of the ISSP studies, refer to Hadler, Gundl, and Vrečar (2020), Sapin et al. (2020), and the ISSP website (<http://www.issp.org>).

The countries selected for this study were those that participated in both study waves and were also members of the European Union in 2017. These included Austria, the Czech Republic, Denmark, Finland, France, Germany, Hungary, Slovenia, Spain, Switzerland, and Great Britain. The distribution of respondents by country and year of response is presented in Table 2, and the age and gender distribution of respondents in both years can be found in Table 3.

Table 2. *Number of respondents by the country and the study year.*

Country	Year		Total	Response rate*	
	2001	2017		2001	2017
Germany	1369	1701	3070	46,1	32,0
Great Britain	912	1595	2507	58,7	36,6
Austria	1011	1200	2211	65,5	51,1
Hungary	1524	1007	2531	59,6	55,6
Czech Republic	1200	1405	2605	66,1	54,6
Slovenia	1077	1047	2124	65,6	56,8
Spain	1214	1733	2947	95,2	58,3
France	1398	1489	2887	14,4	32,3
Denmark	1293	1079	2372	67,4	43,2
Switzerland	1001	1066	2067	31,8	41,2
Finland	1439	1074	2513	57,7	43,1
Total	13438	14396	27834		

*Response rates calculated from the figures of Klein and Harkness 2001 and Sapin et al. 2019.

Table 3. *Respondents by the study year, gender and age group.*

Year	Gender		Age group					Total		
			-24	25-34	35-44	45-54	55-64			
2001	Gender	Male	12,5	17,9	19,4	17,8	15,1	17,3	100	6380
		Female	11,5	19,1	19,2	17,2	14,4	18,6	100	7057
	Total		12,0	18,5	19,3	17,5	14,7	18,0	100	13434
2017	Gender	Male	9,3	15,2	17,1	18,7	16,8	22,9	100	6974
		Female	8,9	15,4	16,7	18,4	16,6	24,1	100	7422
	Total		9,1	15,3	16,9	18,6	16,7	23,5	100	14396
TOTAL	Gender	Male	10,8	16,5	18,2	18,3	16	20,2	100	13357
		Female	10,1	17,2	18,0	17,8	15,5	21,4	100	14479
	Total		10,5	16,9	18,1	18	15,7	20,8	100	27833

In both surveys, participants were posed a question designed to measure the level of AFR in this study: ‘To what extent do you agree or disagree with the following statement? Adult children have a duty to care for their older parents?’. The response options included: (1) strongly agree, (2) agree, (3) neither agree nor disagree, (4) disagree, and (5) strongly disagree. For the purposes of this study, a reverse scale was employed, indicating

that a high score represented positive attitudes towards the statement, and vice versa. In this study, we analyse the mean AFRs from 2001 to 2017, taking into account variables such as country of residence, age groups, and gender. We calculated group-specific confidence intervals for the mean values using a t-test, and primarily present the results in the form of figures. These figures were generated using the statistical software SPSS (version 28).

Results

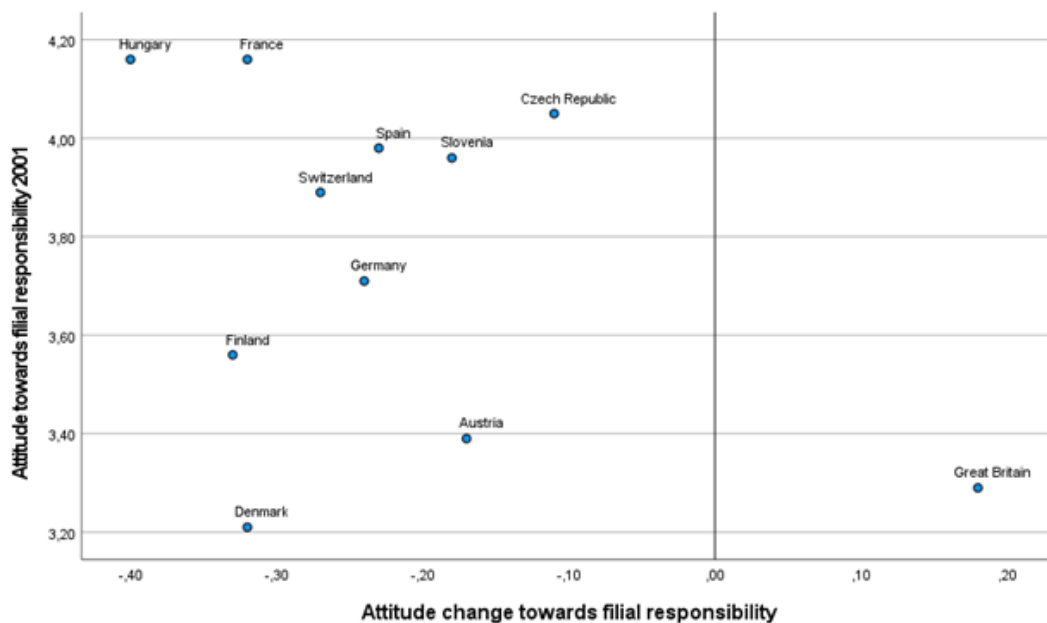
Our analysis commenced with the calculation of average AFRs by country for both years under study. These results are presented in Table 4, where countries are organised based on the magnitude of change. First, we discovered that, barring Great Britain, where the AFR demonstrated an increase in strength, all other countries exhibited a decrease in AFR strength, a change that was statistically significant. The decline in strength was most pronounced in Hungary and least noticeable in the Czech Republic.

Table 4. *Attitude towards filial responsibility, means by country and study year.*

Country	Attitude towards filial responsibility 2001	Attitude towards filial responsibility 2017	Change	T-test Sig.
Hungary	4,16	3,76	-0,4	< 0.001
Finland	3,56	3,23	-0,33	< 0.001
France	4,16	3,84	-0,32	< 0.001
Denmark	3,21	2,89	-0,32	< 0.001
Switzerland	3,89	3,62	-0,27	< 0.001
Germany	3,71	3,47	-0,24	< 0.001
Spain	3,98	3,75	-0,23	< 0.001
Slovenia	3,96	3,78	-0,18	< 0.001
Austria	3,39	3,22	-0,17	< 0.001
Czech Republic	4,05	3,94	-0,11	= 0.001
Great Britain	3,29	3,47	0,18	< 0.001

Next, we categorised the countries based on the initial level of attitudes and the extent of the change (Figure 1), resulting in four groups. The first group comprised Hungary and France, which had relatively high AFR in 2001, but the reduction in AFR has been quite significant. The second group included the Nordic countries, such as Denmark and Finland. Despite their AFR being initially low, the decrease was equivalent to that of Hungary and France. The third group included Switzerland, Spain, Germany, and Slovenia, where the initial level of AFR was average or slightly higher than the other countries,

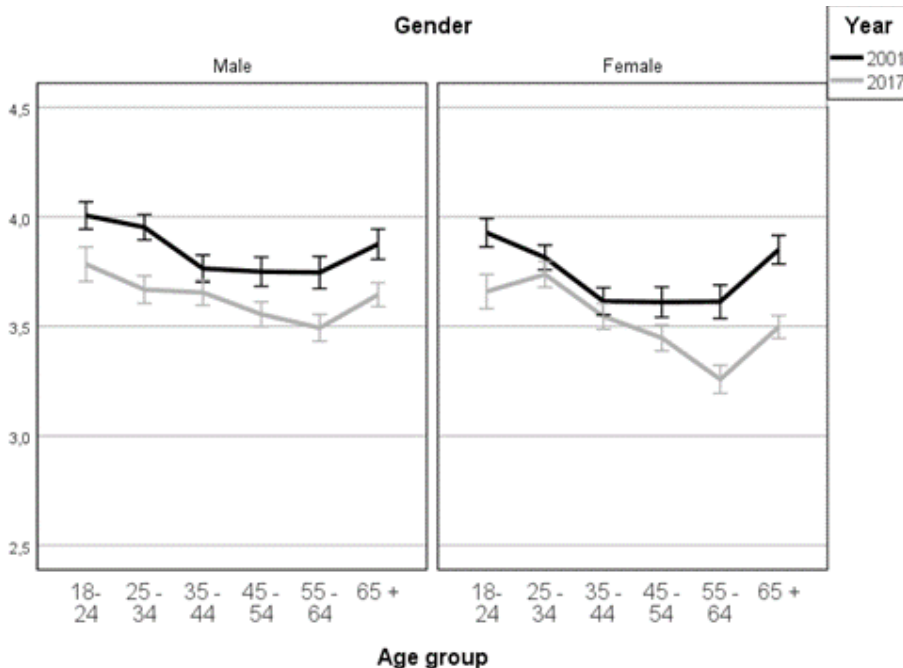
Figure 1. Level of AFR in 2001 and change of AFR between 2001 and 2017.



and the reduction in AFR was moderate. The other countries form a mixed group. Austria is the only country where the initial level of AFR in 2001 was distinctly low, and the decrease was only minor. The Czech Republic distinguishes itself from other countries with a high AFR starting level and minor change. Great Britain is the only country where the initial level of AFR was clearly low but the change of AFR was positive.

Prior to conducting in-depth investigations specific to each country, we analysed the variations based on the gender and age of the respondents across all 11 countries (Figure 2). First, we analysed the association between age group and AFR, which appears to form a U-shaped curve in both years and for both genders: Level of AFR is highest among young respondents, decreased among middle-aged respondents, and increased again among older age groups. Middle-aged women were slightly more critical of the duty of care than men of the same age. When we analysed the shift in attitudes between 2001 and 2017, we observed, first, that for men, the AFR has decreased fairly uniformly across all age groups. For women, however, this change was observed in the oldest age groups, particularly those aged 55–64, but also noticeably among those over 65. Moreover, it seems that the change is not statistically significant among men aged 35–44 and women aged 25–44.

Figure 2. AFR by the study year, gender and age of the respondents: all 11 countries.
Error bars: 95 % CI.

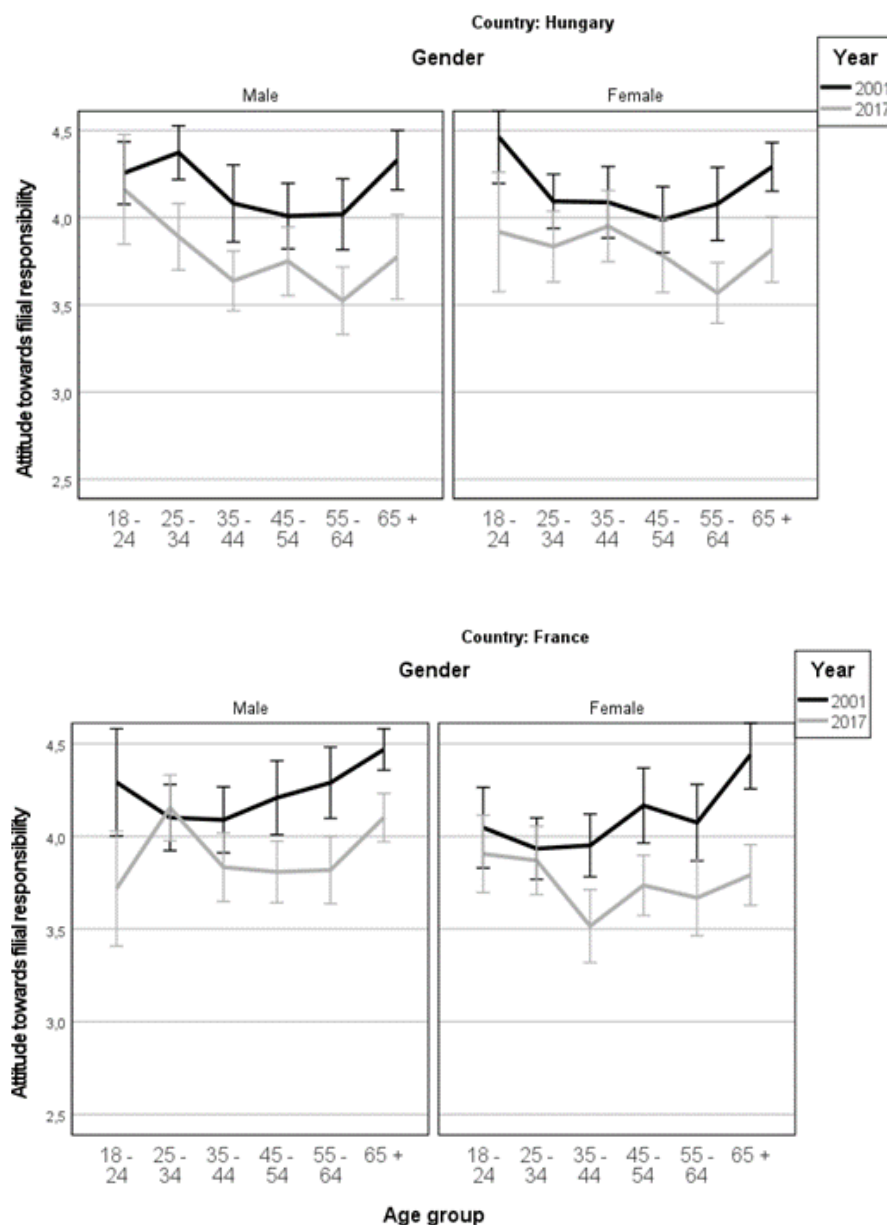


Subsequently, we analysed the outcomes by country. First, we examined Hungary and France, both of which had a high baseline and demonstrated significant change (Figure 3). In 2001, Hungarian men and women were strongly supportive of the duty of care, with the middle-aged demographic being slightly more critical than other age groups. The shift in attitudes appears to have taken place across both genders and all age groups, although it is more pronounced in men than in women. The change is marginally stronger in the oldest age groups compared with the younger ones. For France, we observed that even in 2001, the AFR increased with age. The change particularly affected the attitudes of the oldest respondents, including both men and women.

In Denmark and Finland, the association between age and AFR was negative in 2001, the opposite of that observed in France (Figure 4). In Denmark, the AFR for both young men and women was noticeably lower in 2017 than in previous years. This is also true for young Finnish men. Particularly in Finland, women over the age of 55 appear to be more critical of the duty of care. In both countries, the association between AFR and age appears to be negative. This is likely a reflection of the fact that older adults in these countries are accustomed to living independently and, when necessary, have high expectations of public services to help them.

The third group comprises four countries with a moderate average baseline and change, as depicted in Figure 5. These countries include Germany, Slovenia, Spain, and Switzerland. A notable characteristic of these countries is the shifting attitudes, especially among middle-aged and older women. For instance, German and Swiss women aged between 55 and 64 years were almost as critical of the care norm in 2017 as their

Figure 3. AFR by the study year, gender and age of the respondents: Hungary and France (group one). Error bars: 95 % CI



counterparts in Denmark and Finland. Furthermore, our analysis revealed that, in 2001, the association between age and AFR in three of these countries formed a U-shaped curve, with Spain being the exception. Spain's situation closely mirrored that of France, where the association was primarily linearly ascending. Even in 2017, it appears that the oldest age group in these countries still expects care from the younger generations, in contrast with the Nordic countries.

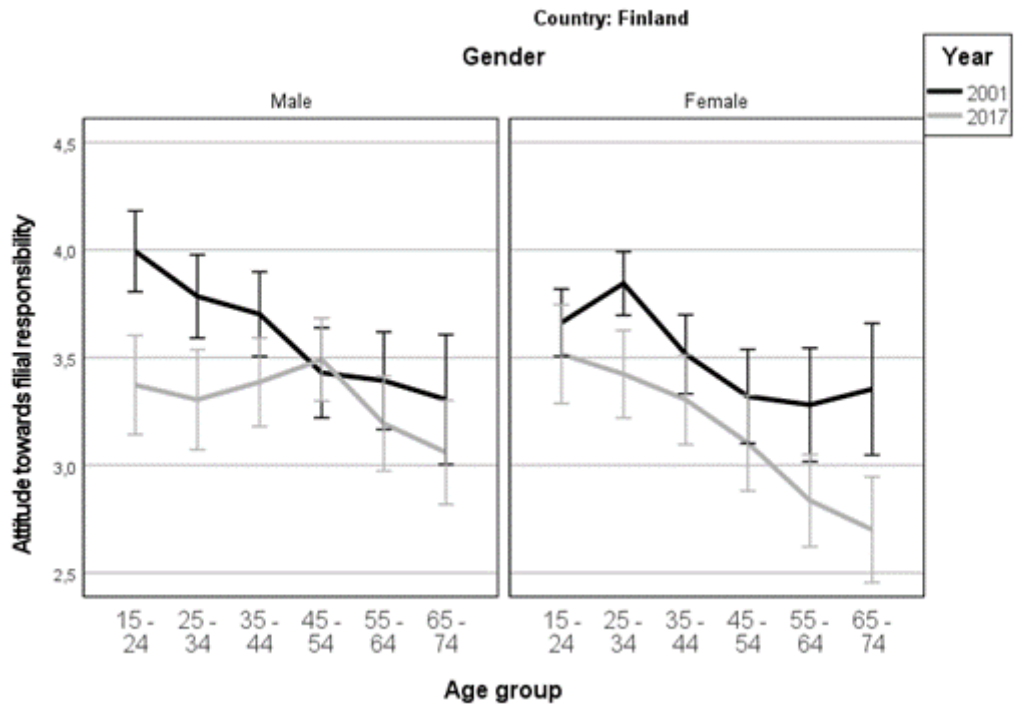
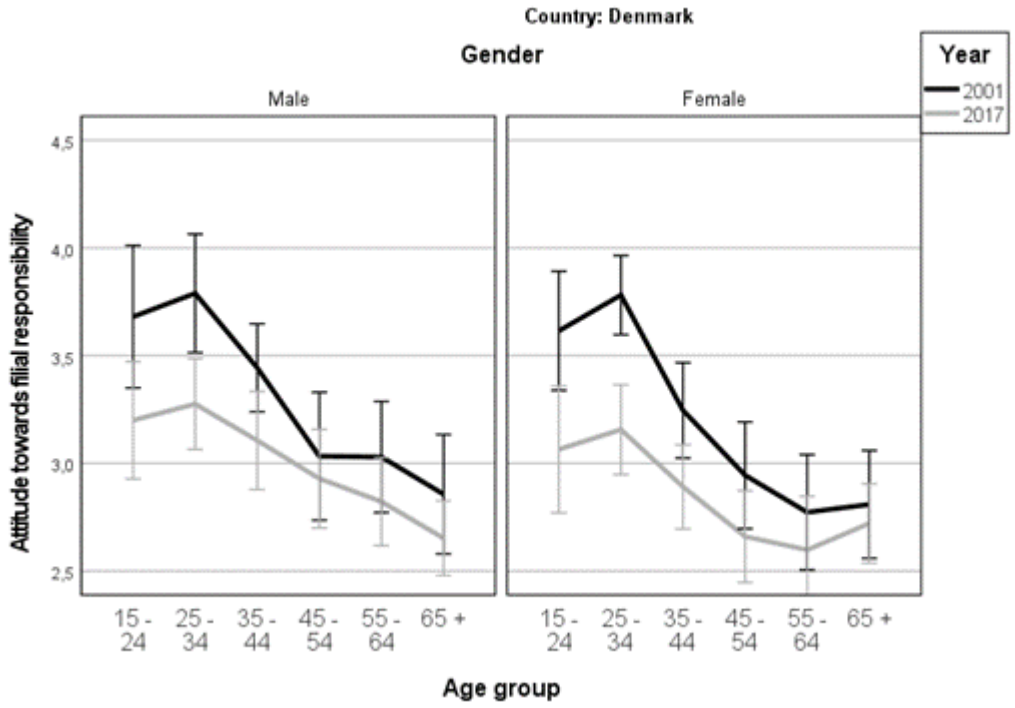
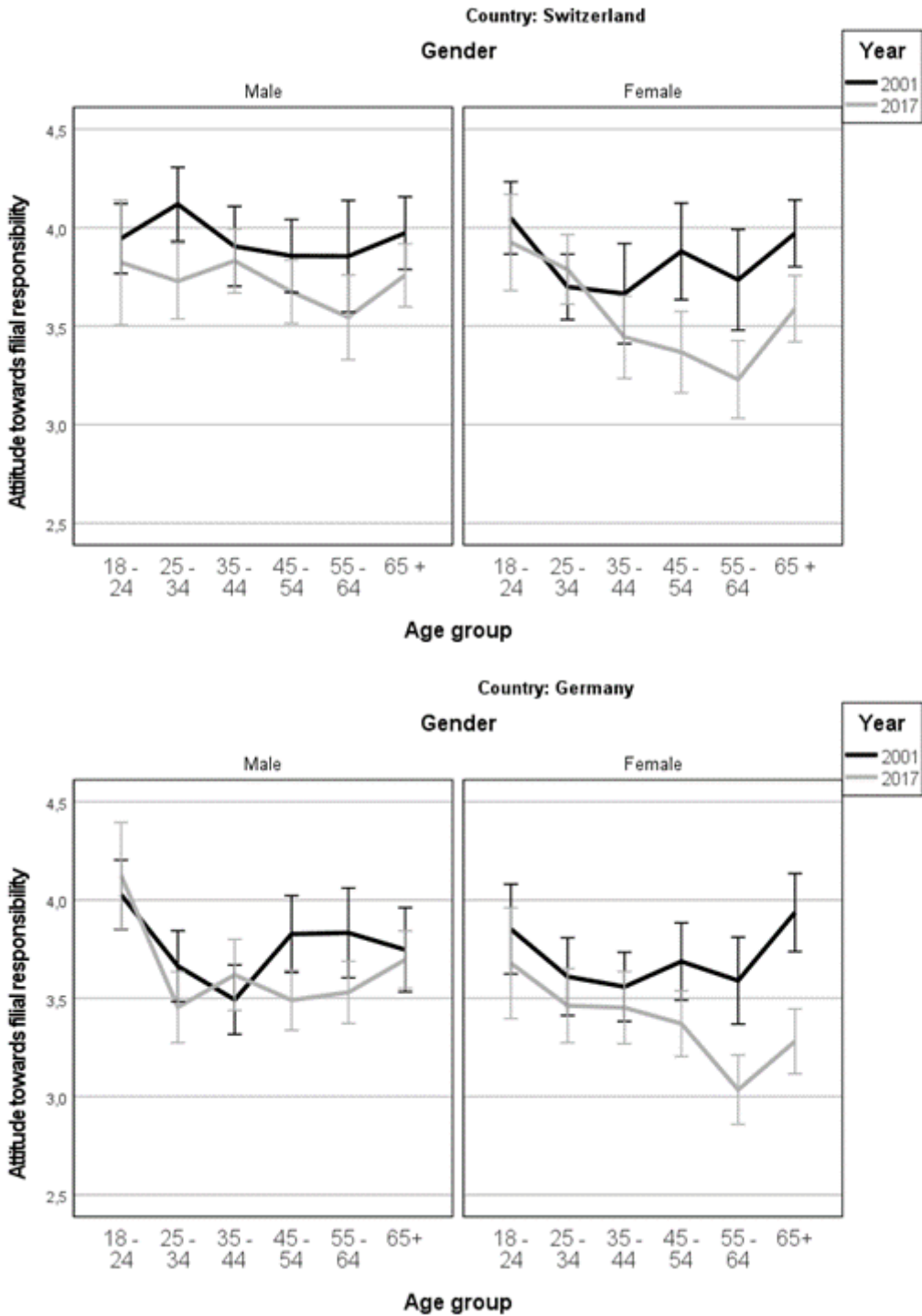


Figure 4. AFR by the study year, gender and age of the respondents: Denmark and Finland (group two). Error bars: 95 % CI.



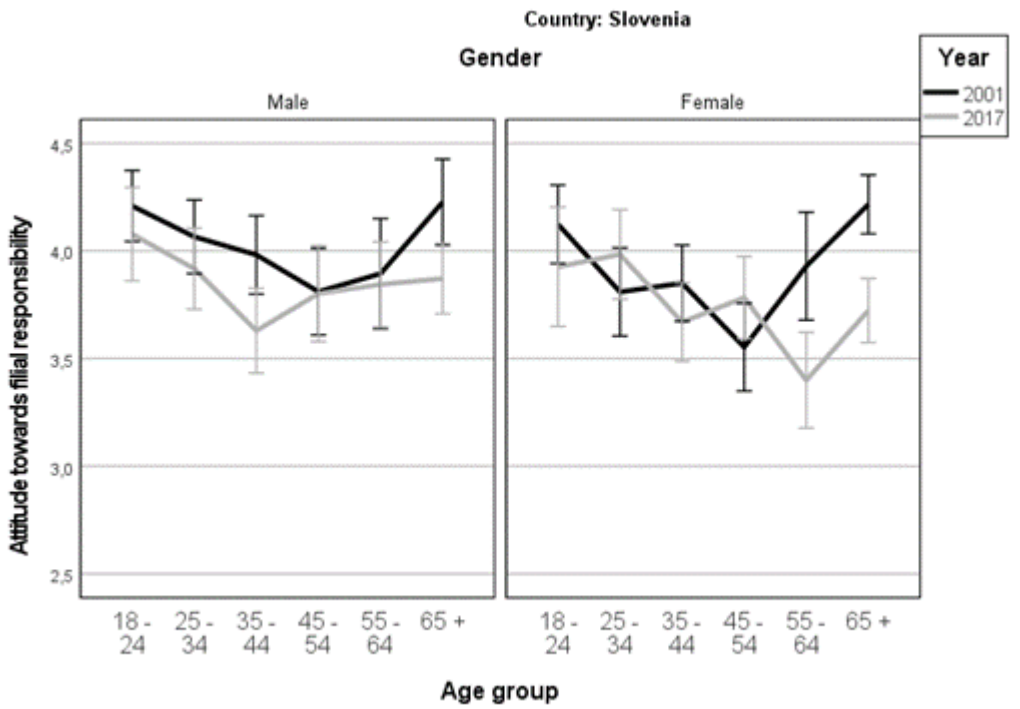
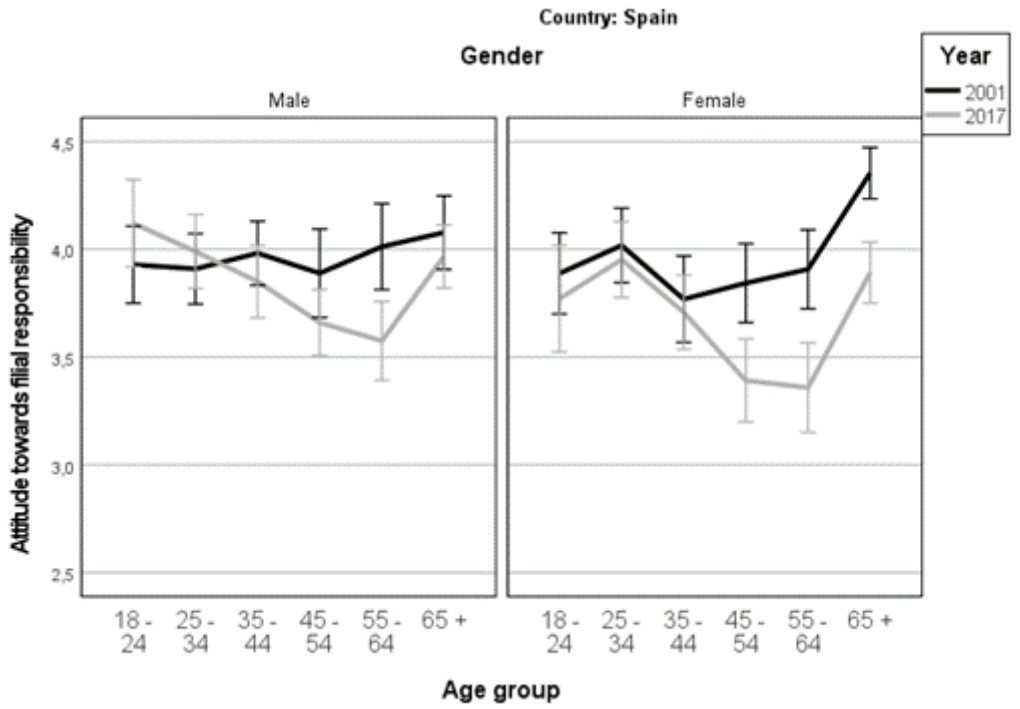
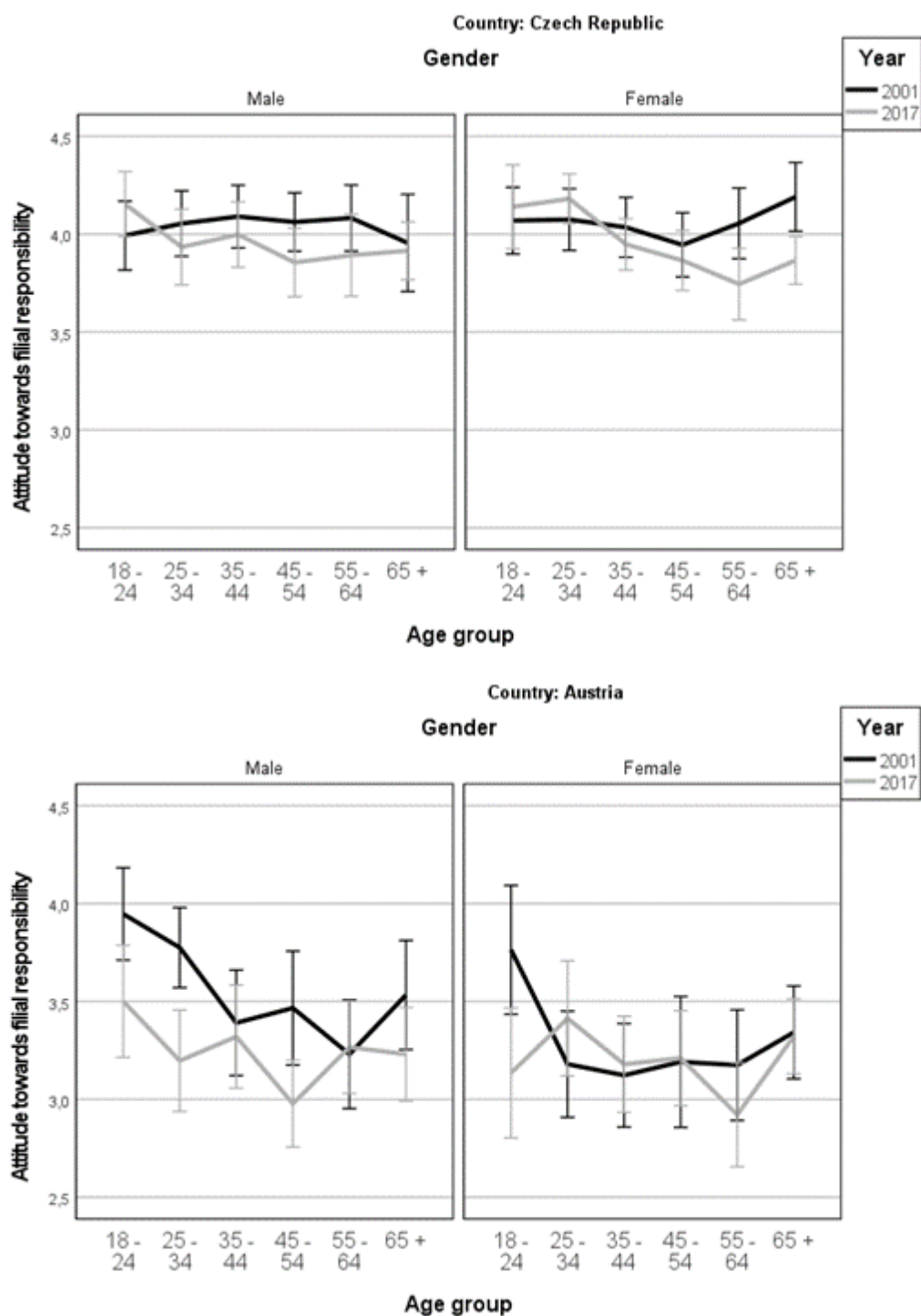
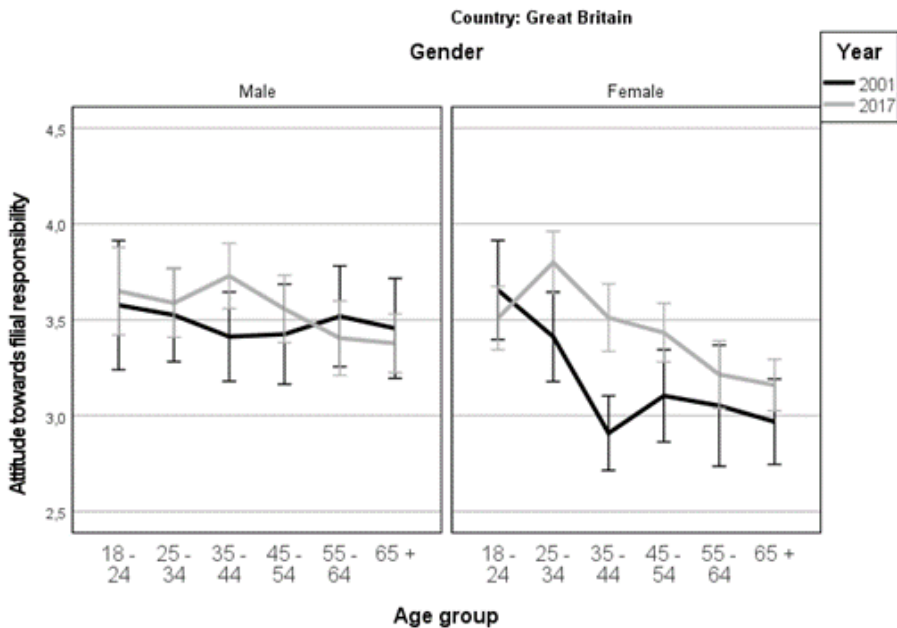


Figure 5. AFR by the study year, gender and age of the respondents: Switzerland, Germany, Spain and Slovenia (group three). Error bars: 95 % CI.





The final three countries form a mixed group (Figure 6). In 2001, the Czech Republic demonstrated a strong acceptance of the filial responsibility norm, irrespective of the age or gender of the respondent, and minimal change was observed in 2017. The only noticeable shift appears to be a decrease in acceptance among older women. Austria exhibited a pattern in 2001 that was very similar to that of the Nordic countries, being quite critical of the AFR norm, and this decreased with age in both sexes. The most significant change between 2001 and 2017 was observed among young men, who demonstrated an increased criticism of the filial responsibility norm.

Figure 6. AFR by the study year, gender and age of the respondents: Czech Republic, Austria and Great Britain (mixed group). Error bars: 95 % CI.

Great Britain stands out from other nations, owing to the low initial level but clear increase in the AFR between 2001 and 2017. This shift was most pronounced among women aged 35–44, but a comparable trend was also observed among men of the same age bracket. Note that the association between the respondent's age and the AFR mirrors that in the Nordic countries for both years under examination, particularly for women: as the age group increased, the AFR decreased significantly. In this regard, there was no change in Great Britain between 2001 and 2017.

Discussion and conclusions

This study aimed to analyse the levels of AFR in 11 European countries from 2001 to 2017, focusing on variations by respondents' gender and age. The primary finding high-

lights that in 2017, the level of AFR was lower than in 2001 in 10 out of the 11 countries. This provides ample support for our first hypothesis that the level of AFR will be lower in 2017 compared to 2001. However, this change was not statistically significant across all age groups and both genders in every country. Most notably, the change was most pronounced among those who traditionally bear the greatest responsibility for caring for their ageing parents, such as women in late middle age. This aligns with our second hypothesis, which anticipated a decrease in AFR, especially among middle-aged women and women nearing retirement age. Moreover, the results varied among countries, and it is challenging to identify clear patterns from the country-specific variations in attitude change.

Certain social processes can be highlighted as likely to affect changes in AFR. First, these include variations in family cultures across different European countries and the ongoing changes within them. The transformation of family cultures is related to a rise in individualism, which parallels with economic growth and the general process of modernisation. This process is associated with several phenomena, such as an increase in divorce rates and the emergence of new family structures. However, the most significant change that affects the family unit is the enhanced position of women in the labour market. In this regard, the shift in Europe over the past few decades has been quite dramatic, with developments that are unlikely to reverse. From the perspective of AFR development, this implies that even if individuals are willing to care for their older parents, the practical possibilities of taking on this demanding care responsibility are increasingly limited. In this context, the results currently obtained, particularly for middle-aged women, fit logically. Moreover, the normative obligations placed on the so-called Sandwich Generation extend not only to their parents, but also to their children and grandchildren (Hämäläinen and Tanskanen 2021). Owing to demographic changes, a larger proportion of women in late middle age have older parents and young grandchildren.

Second, we examined the welfare state's role in the sustenance and care of older adults. Prior research has demonstrated that the process of modernisation is considered differently across various countries when developing welfare state systems (Dykstra and Djundeva 2020; Frericks and Höppner 2018; Ranci and Pavolini 2015). In numerous countries, welfare systems remain largely family-centric, operating under the assumption that younger generations (typically women) bear the ultimate responsibility for caring for their parents. Norms surrounding care persist in many societies with a traditional family culture. Despite the existence of traditional gender role attitudes or fears of neglecting or even forsaking older adults, comparative studies highlight that in countries with extensive pension coverage and well-established, efficient public services for older adults, communication and interaction among family members are actually more effective than in countries where care is primarily a family responsibility (Dykstra 2018; Daatland and Lowenstein 2005). Efficient welfare state systems lay the foundation for an independent life for both older adults and their children. Interaction is optimal when it is voluntary, not enforced. This study also found that in countries with robust welfare states, such as Denmark and Finland, even the oldest respondents (potential aid recipients) were sceptical of the notion of adult children being obligated to care for their parents. Therefore, this research's primary outcome provides a positive outlook for future political decision-mak-

ing: by enhancing welfare state services, obligatory intergenerational assistance and support may decrease, while voluntary willingness for interaction and mutual aid between older adults and their adult children may increase.

Perhaps the most unexpected result from the current study relates to Great Britain, the only country where the AFR was higher in 2017 than in 2001. This shift was statistically significant for women in their early middle age. Crawford Stoye, and Zaranko (2021) found that in England, local government funding for long-term adult care, often referred to as adult social care, was significantly reduced in the 2010s. According to these authors' calculations, per capita spending on long-term care for individuals aged over 65 decreased by 31% over the eight years between 2009/2010 and 2017/2018 (see also Fernandez, Snell, and Wistow 2013). In reality, the cuts were aimed specifically at community-based care, which includes domiciliary care provided in the recipient's home. The spending reductions did not appear to affect older adults in institutional care. These cuts were implemented by tightening means-testing standards and increasing income limits, leaving a significant number of home care customers without support. Crawford et al. (2021) also found that reductions in public long-term care spending led to a substantial increase in emergency department visits by patients aged 65 and above.

Moreover, Zigante, Fernandez, and Mazzotta (2021) analysed the effect of diminishing long-term care on the degree of informal care in England, discovering that 'the decrease in publicly funded formal care provision was particularly associated with significant increases in high-intensity informal care provision'. This appears to highlight that as formal support diminishes, immediate family members of older adults are compelled to augment informal support. This could explain why there was a discernible positive change in AFR in Great Britain. If this is the case, it could be argued that when assistance from society diminishes, necessity becomes a virtue. To verify this, additional research and more comprehensive European data on the provision of formal care and its effect on AFR are required.

This study boasts numerous strengths. First, it includes a comparison of 11 countries, allowing for the observation of AFR development across various European societies. Second, we have analysed shifts in attitudes from 2001 to 2017, a period during which the ageing process in European societies advanced significantly, and we were able to identify notable differences among countries. Third, we have conducted analyses based on both gender and age groups, an approach seldom used. These analyses highlight that changes in AFR are most common among middle-aged women.

However, our study is not without its limitations. The findings are based on a comparison of two points in time, which may overlook a potential generational effect. Furthermore, AFR was measured using a single question. It is plausible that the attitudes under investigation have multiple dimensions that a single question cannot fully capture. Research that has employed multiple items to measure AFR has considered the intensity of social support provided. In general, individuals are most willing to commit to giving and receiving assistance that does not foster excessive interdependence between parties. However, when AFR is measured using multiple items (Dykstra and Fokkema 2012; Gans and Silverstein 2006; Wang et al. 2021), the correlations between items have been notably high. This suggests that the single-question measure we used in this study

may accurately represent the change in AFR across different countries and demographic groups. Nevertheless, future studies that employ additional AFR measures should use a sum variable composed of multiple items as the dependent variable.

Finally, we can ask: What is the societal significance of filial attitudes in terms of providing social assistance and support to older generations. Some studies have assumed that the positive attitude of adult children towards filial responsibility leads to an increase in social support and assistance for older generations (e.g. Dykstra 2010; Silverstein et al. 2006; Haberkern et al. 2015). If the assumption were true, the result of our study would mean that the informal social support provided by adult children to their aging parents would be declining in the future. However, the results of the research seem controversial in this respect.

Three recent studies have offered differing responses to a crucial question. Chappell and Funk (2012) carried out research involving various cultural groups in Canada, and their findings offered only limited evidence to affirm the idea that an increased focus on filial obligations leads to more support being provided. Vangen and Herlofson (2023) analysed longitudinal data from Norway, finding that the level of AFR did not sufficiently explain the amount of social support given. Lastly, Diederich, König, and Brettschneider (2023) examined the German Family Panel, demonstrating that positive attitudes towards filial norms were indeed passed from parents to their children. Moreover, these attitudes were found to enhance the support provided across generations. As a result, it becomes clear that additional research is necessary to further our understanding of the relationship between attitudes concerning filial obligations and behaviours related to assistance and support.

Data availability statement

ISSP data is available in: <https://www.gesis.org/en/issp/home>

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Conflicts of Interest

There are no conflicts of interest to declare.

References

- Albertini, M., Kohli, M., & Vogel, C. (2007). Intergenerational transfers of time and money in European families: Common patterns—different regimes? *Journal of European Social Policy*, 17(4), 319–334.
- Anttonen, A., & Sipilä, J. (1996). European social care services: Is it possible to identify models? *Journal of European Social Policy*, 6(2), 87–100.
- Arts, W., & Gelissen, J. (2002). Three worlds of welfare capitalism or more? A state-of-the-art report. *Journal of European Social Policy*, 12(2), 137–158.
- Bedford, O., & Yeh, K. H. (2021). Evolution of the conceptualization of filial piety in the global context: From skin to skeleton. *Frontiers in Psychology*, 12. doi: 10.3389/fpsyg.2021.570547
- Bengtson, V. L. (2001). Beyond the nuclear family: The increasing importance of multi-generational bonds. *Journal of Marriage and Family*, 63(1), 1–16.
- Bengtson, V. L., & Roberts, R. E. (1991). Intergenerational solidarity in aging families: An example of formal theory construction. *Journal of Marriage and the Family*, 53(4), 856–870.
- Brandt, M., Haberkern, K., & Szydlik, M. (2009). Intergenerational help and care in Europe. *European Sociological Review*, 25(5), 585–601.
- Broeze van Groenou, M. I., & De Boer, A. (2016). Providing informal care in a changing society. *European Journal of Ageing*, 13(3), 271–279.
- Calzada, I., & Brooks, C. (2013). The myth of Mediterranean familism: Family values, family structure and public preferences for state intervention in care. *European Societies*, 15(4), 514–534.
- Castiglioni, M., Hărăguș, M., Faludi, C., & Hărăguș, P. T. (2016). Is the family system in Romania similar to those of southern European countries? *Comparative Population Studies*, 41, 57–86.
- Chappell, N. L., & Funk, L. (2012). Filial responsibility: does it matter for care-giving behaviours?. *Ageing & Society*, 32(7), 1128–1146.
- Crawford, R., Stoye, G., & Zaranko, B. (2021). Long-term care spending and hospital use among the older population in England. *Journal of Health Economics*, 78, 102477.
- Daatland, S. O., & Herlofson, K. (2003). “Lost solidarity” or “changed solidarity”: A comparative European view of normative family solidarity. *Ageing & Society*, 23(5), 537–560.
- Daatland, S. O., & Lowenstein, A. (2005). Intergenerational solidarity and the family–welfare state balance. *European Journal of Ageing*, 2(3), 174–182.
- Daatland, S. O., Herlofson, K., & Lima, I. A. (2011). Balancing generations: on the strength and character of family norms in the West and East of Europe. *Ageing & Society*, 31(7), 1159–1179.

- Daatland, S. O., Veenstra, M., & Herlofson, K. (2012). Age and intergenerational attitudes in the family and the welfare state. *Advances in Life Course Research*, 17(3), 133–144.
- Diederich, F., König, H. H., & Brettschneider, C. (2023). The intergenerational transmission of filial norms and children's provision of long-term care to parents. *Ageing & Society*, 1–21.
- Dykstra, P. A. (2010). Intergenerational family relationships in ageing societies. United Nations.
- Dykstra, P. A. (2018). Cross-national differences in intergenerational family relations: The influence of public policy arrangements. *Innovation in Aging*, 2(1), 1–8.
- Dykstra, P., & Djundeva, M. (2020). Policies for later-life families in a comparative European perspective. In R. Nieuwenhuis and W. Van Lancker (Ed.) *The Palgrave Handbook of Family Policy* (pp. 331–367). Springer Nature.
- Dykstra, P. A., & Fokkema, T. (2012). Norms of filial obligation in the Netherlands. *Population-E*, 67, 97–122.
- Eagly, A. H., & Chaiken, S. (1993). *The psychology of attitudes*. Harcourt Brace Jovanovich.
- Eagly, A. H., & Chaiken, S. (2007). The advantages of an inclusive definition of attitude. *Social Cognition*, 25(5), 582–602.
- Esping-Andersen, G. (1990). *The three worlds of welfare capitalism*. Polity Press.
- Esping-Andersen, G. (2009). *Incomplete revolution: Adapting welfare states to women's new roles*. Polity Press.
- European Commission. (2021). *Long-Term Care Report: Trends, challenges and opportunities in an ageing society*. Volume 1. Social Protection Committee (SPC) and the European Commission (DG EMPL).
- Evalue. (2023). European values in education. <https://www.atlasofeuropeanvalues.eu/maptool.html> [accessed 26 October 2023]. (r3/10)
- Fernandez, J. L., Snell, T., & Wistow, G. (2013). Changes in the patterns of social care provision in England: 2005/6 to 2012/13. Personal Social Services Research Unit, PSSRU Discussion Paper 286. Retrieved from www.pssru.ac.uk.
- Fokkema, T., Ter Bekke, S., Dykstra, P. A., & Outmany, F. (2008). *Solidarity between Parents and Their Adult Children in Europe*. Amsterdam University Press.
- Frericks, P., & Höppner, J. (2018). What about family in European old-age security systems? The complexity of institutional individualisation. *Ageing & Society*, 38(3), 594–614.
- Gans, D., & Silverstein, M. (2006). Norms of filial responsibility for aging parents across time and generations. *Journal of Marriage and Family*, 68(4), 961–976.
- Haber Kern, K., Schmid, T., & Szydlik, M. (2015). Gender differences in intergenerational care in European welfare states. *Ageing & Society*, 35(2), 298–320.
- Hadler, M., Gundl, F., & Vrečar, B. (2020). The ISSP 2017 survey on social networks and social resources: An overview of country-level results. *International Journal of Sociology*, 50(2), 87–102.

- Hajnal, J. (1965). European marriage patterns in perspective. In: Glass, David Victor; Eversley, David Edward Charles (Eds.): *Population in History. Essays in Historical Demography*. London: Edward Arnold: 101–143.
- Hajnal, J. (1982). Two kinds of preindustrial household formation system. *Population and Development Review*, 8, 449–494.
- Hämäläinen, H., & Tanskanen, A.O. (2021). Sandwich generation: Generational transmissions towards adult children and elderly parents. *Journal of Family Studies*, 27(3), 336–355.
- Herlofson, K., Hagestad, G., Slagsvold, B., & Sørensen, A. M. (2011). *Intergenerational family responsibility and solidarity in Europe*. Multilinks Project, Norwegian Social Research (NOVA), (104 Multilinks Project).
- Hsu, H. C., Lew-Ting, C. Y., & Wu, S. C. (2001). Age, period, and cohort effects on the attitude toward supporting parents in Taiwan. *The Gerontologist*, 41(6), 742–750.
- Hui, C. H., & Triandis, H. C. (1986). Individualism-collectivism: *A study of cross-cultural researchers*. *Journal of Cross-Cultural Psychology*, 17(2), 225–248.
- Inglehart, R., & Baker, W. E. (2000). Modernization, cultural change, and the persistence of traditional values. *American Sociological Review*, 65(1), 19–51.
- Laslett, P. (1983). Family and household as work group and kin group: areas of traditional Europe compared. In: Wall, Richard et al. (Eds.): *Family forms in Historic Europe*. Cambridge: Cambridge University Press.
- Lesthaeghe, R. (2014). The second demographic transition: A concise overview of its development. *Proceedings of the National Academy of Sciences*, 111(51), 18112–18115.
- Lesthaeghe, R., & van de Kaa, D. J. (1986). Twee demografische transitities. *Bevolking: groei en krimp*, 1986, 9–24.
- Lowenstein, A., & Daatland, S.O. (2006). Filial norms and family support in a comparative cross-national context: Evidence from the OASIS study. *Ageing & Society*, 26(2), 203–223.
- Marckmann, B. (2017). All is not relative: Intergenerational norms in Europe. *European Societies*, 19(4), 466–491.
- Mureşan, C., & Hărăguş, P. T. (2015). Norms of filial obligation and actual support to parents in Central and Eastern Europe. *Romanian Journal of Population Studies*, 9(2).
- OECD (2017). *Demographic trends, in Health at a Glance 2017: OECD Indicators*. OECD Publishing. Available from: https://doi.org/10.1787/health_glance-2017-73-en [Accessed 28 March 2023].
- Plantenga, J., Remery, C., Figueiredo, H., & Smith, M. (2009). Towards a European Union gender equality index. *Journal of European Social Policy*, 19(1), 19–33.
- Ranci, C., & Pavolini, E. (2015). Not all that glitters is gold: Long-term care reforms in the last two decades in Europe. *Journal of European Social Policy*, 25(3), 270–285.
- Reher, D.S. (1998). Family Ties in Western Europe: Persistent Contrasts. *Population and Development Review*, 24 (2), 203–234.
- Santos, H. C., Varnum, M. E., & Grossmann, I. (2017). Global increases in individualism. *Psychological Science*, 28(9), 1228–1239.

- Sapin, M., Joye, D., Wolf, C., Andersen, J., Bian, Y., Carkoglu, A., Fu, Y-C, Kalaycioglu, E., Marsden, P.V., & Smith, T.W. (2020). The ISSP 2017 social networks and social resources module. *International Journal of Sociology*, 50(1), 1–25.
- Saraceno, C., & Keck, W. (2010). Can we identify intergenerational policy regimes in Europe?. *European Societies*, 12(5), 675–696.
- Silverstein, M., Gans, D., & Yang, F. M. (2006). Intergenerational support to aging parents: The role of norms and needs. *Journal of Family Issues*, 27(8), 1068-1084.
- Stuifbergen, M. C., & Van Delden, J. (2011). Filial obligations to elderly parents: A duty to care? *Medicine, Health Care and Philosophy*, 14(1), 63–71.
- Tanskanen, A. O., & Danielsbacka, M. (2019). *Intergenerational family relations. An evolutionary social science approach*. Routledge.
- Triandis, H. C. (2001). Individualism-collectivism and personality. *Journal of Personality*, 69(6), 907–924.
- van den Broek, T., Dykstra, P. A., & van der Veen, R. J. (2015). Care ideals in the Netherlands: Shifts between 2002 and 2011. *Canadian Journal on Aging*, 34(3), 268-281.
- Vangen, H., & Herlofson, K. (2023). Why care? How filial responsibility norms and relationship quality matter for subsequent provision of care to ageing parents. *Ageing & Society*, 1–25.
- Wang, Y., Wan, G., & Gu, Y. (2021). Consistency and transformation of filial responsibility attitudes in China: Evidence from panel study of family dynamics of 2004 and 2017. *Journal of Family Issues*. doi: 10.1177/0192513X211048475
- Zigante, V., Fernandez, J. L., & Mazzotta, F. (2021). Changes in the balance between formal and informal care supply in England between 2001 and 2011: Evidence from census data. *Health Economics, Policy and Law*, 16(2), 232–249.

